

## OFFICE OF THE ILLINOIS STATE FIRE MARSHAL

## **Division of Technical Services**

1035 Stevenson Drive Springfield, Illinois 62703-4259

FOR OFFICE USE ONLY	
Facility #	
Permit #	

APPLICATION for Permit for <u>UPGRADE OR REPAIR</u> of Underground Storage Tanks. Complete in triplicate (one original and two copies) and file with triplicate site plans to: Office of the State Fire Marshal, Division of Petroleum and Chemical Safety, 1035 Stevenson Drive, Springfield, IL 62703.

(1) OWNER OF TANKS - Corporation, partnership, or other business entity: (Must be mailing address)  Name  Street Address					(2) FACILITY - Facility ID #				
				Name					
				Street Ad					
City	State	Zip	)	City	St	ate Z	ip County	y	
Contact Person	 I	Phon	ne	Contact P	erson	P	hone		
attached docun information sul	CTOR: I certify undonents, and that based of bmitted is true, accura	on my inquiry of ate and complete	those individuals	s immediately res	sponsible for obt	aining the infor	mation, I believe th	nat all	
					Address				
	y Stat								
Telephone #	elephone # Fax #			Contracto	Contractor License # IL Expiration Date				
Name of Author	orized Representative			Title	or Position				
Signature				Date _					
(5) <u>TYPE OF</u>	TUS - Check one:  SYSTEM - Check w.  Fuel Waste Oil	hichever applies	_	nation is required	for each type of	system:	Jarinas Hazard	oue Substanc	
	explain)								
( <b>6</b> ) Provide a <u>S</u>	UMMARY OF WO	<b>RK</b> to be perform	med and explain a	any unusual circu	mstances on a se	eparate sheet.			
(7) <u>GENERAI</u>	L INFORMATION -		er applies and fill al sheet(s) if more			UST system(s)	that will be involv	ed.	
(a) TANK(		Product	Double Wall	Composite	FRP	STI P3 Steel	Manufacturer	Length of	
(a) TANK( Tank ID #	Capacity in Gallons							Warranty	
								Warranty	
								Warranty	
								Warranty	
								Warranty	

The OSFM REQUIRES the disclosure of the requested information to issue this permit, pursuant to 430 ILCS, Act 15, Gasoline Storage Act. Failure to provide the requested information will result in this permit application not being processed. Such failure will result in the application being returned - it will be returned to the applicant only once (without being denied) and if resubmitted, is REQUIRED to be done within 14 days from the date of return.

(8) <u>TANK(S) COMPLIANCE INFORMATION</u> - (New tanks must be U.L. approved. Used tanks must have OSFM approved recertification). Check whichever applies and use the space provided to describe the work to be performed or the methods to be used and <b>give the manufacturer and model of</b>
any equipment, consoles, probes, sensors, etc. to be installed (do not give catalog numbers). Attach additional sheet(s) if more space is needed.
(a) RELEASE DETECTION: Manual Tank Gauging Automatic Tank Gauging Interstitial Monitoring Other (explain below)
Equipment and/or explanation:
(b) CORROSION PROTECTION: STI-P3 Composite Fiberglass Other (explain below) Note: CP Equip must use CP App.
(c) SPILL PREVENTION: Spill Containment Manhole Field Constructed Containment Other (explain below)  Equipment and/or explanation:
(d) OVERFILL PREVENTION: Drop Tube Valve Float Vent Valve Alarm and/or shutoff Other (explain below) Equipment and/or explanation:
(9) <u>PIPING COMPLIANCE INFORMATION</u> - Check whichever applies and use the space provided to describe the work to be performed or the methods be used and <b>give the manufacturer and model of any equipment</b> , consoles, probes, sensors, etc. to be installed ( <b>do not give catalog numbers</b> ). Indicate manufacturer of product piping, vent piping and remote fills. Attach additional sheet(s) if more space is needed.  (a) <b>PIPING:</b> Single Wall Double Wall Fiberglass Steel Other
Existing to remain Installing new Installing partial Note: Removal or Abandonment Permit may be required Equipment and/or explanation
(b) RELEASE DETECTION:
1. Pressurized Piping: Line Leak Detector with Annual Line Test Continuous Line Pressure Monitor Interstitial Monitoring Groundwater Monitoring Vapor Monitoring Other (explain below)
2. Suction Piping: Interstitial Monitoring Groundwater Monitoring Vapor Monitoring Line Test Every Year  European (Safe) Suction Other (explain below)
Equipment and/or explanation:
(c) CORROSION PROTECTION: Dielectric Coating Sacrificial Anode(s) Impressed Current Fiberglass Other (explain below)
(Installation of Cathodic Protection Equipment must be submitted on a Cathodic Protection Application)  Equipment and/or explanation:
(10) ARE ALL UST COMPONENTS THIRD PARTY LISTED FOR THEIR INTENDED USE? Yes No If 'No" check one: Attaching a licensed P.E. approval statement for unlisted equipment; or Facility will conduct more frequent inspections of the unlisted equipment in accordance with rule requirements If "No", have you verified that listed components are not available? Yes No Explain equipment that will not be listed:
(11) <u>SITE PLANS</u> - Drawings of the site must accompany the application forms. They must show the entire UST system (tanks, piping, vents, islands, dispensers or other appurtenances) in relation to all buildings, structures and objects with specified setback distances. All objects on the site plans must be named and must be labeled as existing or as proposed. Site plans are not required if only installing equipment for leak detection (except monitoring wells), or spill & overfill prevention. The maximum site plans size allowed is 8 1/2" x 11". Blueprints are not acceptable.
(12) <u>MINIMUM SETBACKS</u> - Clearance distances must be given on the site plans in dimensions from the UST system to all buildings, structures and objects with a setback requirement. The minimum setback requirements for all tanks and all piping are at least:
Yes       No         □       20 feet to property lines or right of way lines         □       20 feet to storm sewers lines, sanitary sewer lines or similar underground drainage systems         □       20 feet to basements or similar underground structures         □       300 feet to any mine shaft, air or escape shaft to a mine         □       85 feet to any school, institution, public assembly or theater occupancy         □       400 feet to any potable wells on or near this facility. If no, contact IEPA Groundwater section at (217)785-4787.
It must be noted on the site plans if none of the above apply to this site! There may be provisions to alter these requirements if certain conditions exist under 41 Ill. Adm.Code 175 or if conditions are to remain existing.
(13) <u>AUXILIARY INFORMATION</u> - Other supplemental information, detail drawings or supporting documents may be necessary depending on the type and complexity of the project.
(14) <u>APPLICATION REJECTION</u> - Insufficient information or illegibility can be cause for return or denial.
(15) <u>PERMIT TO WORK</u> - No work can proceed without a granted permit in hand and must be available upon request of the OSFM Storage Tank Safety Specialist.
(16) <u>APPLICANT</u> - The <i>RESPONSIBLE CONTRACTOR</i> must complete this application. A fee of \$200.00 for each site must accompany this

application. (Checks or money orders are to be made payable to the Office of the State Fire Marshal. Do not send cash.)